

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE

**DECLARATION AND POWER OF ATTORNEY**

ATTORNEY'S DOCKET NO.  
**12354/9**

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name,

I believe I am the original, first, and joint inventor of the subject matter that is claimed and for which a patent is sought on the invention entitled **IMPROVED ANTIGENS**, the specification of which is being filed herewith.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose all information known to me which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, we acknowledge the duty to disclose all information known to us to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Patent Application Serial No. 10/306,541, filed November 25, 2002 and  
U.S. Provisional Patent Application Serial No. 60/333,249, filed November 23, 2001

**POWER OF ATTORNEY:** As named inventor, I hereby appoint the following attorney(s) with full power of substitution and revocation, to prosecute said application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

**Estelle J. Tsevdos (Reg. No. 31,145)**  
**Lawrence P. Casson (Reg. No. 46,606)**

SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

**Estelle J. Tsevdos**  
**KENYON & KENYON**  
**One Broadway**  
**New York, New York 10004**  
**(212) 425-7200 (phone)**  
**(212) 425-5288 (facsimile)**

I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME <b>MITTELMAN</b>	FIRST GIVEN NAME <b>Abraham</b>	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY <b>Scarsdale</b>	STATE OR FOREIGN COUNTRY <b>New York</b>	COUNTRY OF CITIZENSHIP <b>United States</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>38 Graham Road</b>	CITY <b>Scarsdale</b>	STATE & ZIP CODE/COUNTRY <b>NY 10583</b>

Signature

Date

FULL NAME OF INVENTOR	FAMILY NAME <b>KANDUC</b>	FIRST GIVEN NAME <b>Darja</b>	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

Signature

Date